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THE CALGARY GENERAL HOSPITAL.

No one who had ever seen the Calgary General could ever forget it. It has perhaps the most beautiful hospital site in the world. As we write these words the lights of the hospital gleam over the blue waters of the Bow—the two bridges to left and right stretch on to the city—the prairie trails behind it stretch on to the far west and east, and the Canadian nurse inside is on night duty. It must have been an inspiring sight the day the hospital was opened.

Colonel Walker, the comrade-in-arms of Colonel Steele in the R.N.W.M.P., must have been a proud man when he saw at last the completion of his labors and victories as the Chairman of the Building Committee.

Fifteen hundred people went to Riverside recently to see the ceremonies marking the formal opening of the largest and most up-to-date institution of the kind in Alberta. Lieut.-Gov. Bulyea turned the golden key, which had been suitably inscribed, and presented to him for the occasion, and then the visitors thronged through the spacious corridors and into the rooms to make a close inspection of the building, in which every citizen is more or less personally interested.

The great size of the building, the beauty of its location, the elegance of its finish and the completeness of its equipment in every detail were a surprise to the visitors, and not one of them left without a feeling of pride in the institution that is to take care of the city's sick and maimed in the future.

The opening ceremonies were simple. They were held in the women's general ward room on the second floor. On an improvised platform were seated the Lieutenant Governor, Mr. A. Allan, President of the Hospital Board; Dean Paget, Chairman of the House Committee; Col. James Walker, Chairman of the Building Committee; Inspector A. M. Jarvis, C.M.G., acting as aide de camp for the Lieutenant Governor; Dr. William Egbert, Acting Mayor of the city, and a member of the Hospital Board. The Calgary Rifles Band furnished the music.

In presenting Lieut. Gov. Bulyea with the golden key, President A. Allan expressed his appreciation of the confidence displayed by the ratepayers in the Hospital Board in voting for two by-laws with which to provide the institution, one for $75,000 and the other for $95,000. The latter sum was voted when the Hospital Board gave to the city a deed for 60 lots comprising the old site and all the buildings on it in return for the money. Mr. Allan said he thought the city would soon be able to sell the property for enough to make up for the $90,000. He also expressed his high regard for the Women's Hospital Aid Society, which he said has always been very useful and was the mainstay of the institution during hard times.

Lieut. Gov. Bulyea said: "It gives me pleasure to be here to participate in

the opening of the best equipped hospital in Alberta. The people of Alberta and Calgary have been prosperous. They should be willing to contribute their share of this prosperity toward the erection of this building, and I am glad that they have. I want particularly to express my regard for the work done by the women. The men ought to be ashamed that they are in such a minority in the conduct of this institution, and yet I am not surprised that it is so, because it is always the case in institutions of this kind. I do not think the men would care to undertake a project of this kind if they were not sure of the sympathy and co-operation of the women.

"I have had the pleasure of going through the entire building, and I have seen the fine furnishings and the splendid rooms. I was particularly struck with the nurses' dining room, and I should like the privilege of being invited down here some day to dine there. I want to congratulate the citizens of Calgary, individually and collectively, on having this fine building, and I now declare by the turning of this key that the building is duly and properly opened."

DR. EGBERT'S ADDRESS.

In his address, Dr. Egbert advocated the support of the hospital by the city. He said:

"During the past year the hospital facilities of the city have been inadequate. The old hospital holds 50 or 60 patients. The new one will accommodate three times as many and give them better facilities. The medical profession has been handicapped by the lack of hospital accommodation, and I don't know how the cases could have been handled if it had not been for the other two hospitals.

"Owing to the rapid development of the city, I do not think it will be many years before still more room will be required. The hospital is unfortunate in not having an endowment such as many other hospitals have. As a consequence the burden of its support has been thrown on a few of the charitably disposed. I think it should be supported by the general revenue of the city. It has been built for the benefit of every class of people, and it is the duty of every citizen to contribute in some way to its maintenance. Under such a system the institution would be more effectually supported, leaving charitably inclined persons free to employ their energies in other directions. The Children's Aid Society, the Associated Charities and other organizations to help the fallen and ameliorate suffering are in need of the fullest support of our citizens."

Col. Walker, who has the distinction of having been a member of the first Hospital Board in the city, told about the early history of hospitals here, and then briefly described the main features of the present building.

Dean Paget said: "After looking through this building and noticing its wonderful equipment, I am satisfied that if it ever becomes necessary for me to have one of my legs cut off, I will come here to have the operation performed, and I will be assured of having it severed in the shortest time and least painful way. You have all heard of the man who, upon being asked how he was getting along, said he was enjoying poor health. All I want to say is that if you want to enjoy poor health like him, this is the place to come. After looking through these luxurious quarters, visitors are likely to feel disposed to change places with the patients. Before closing I wish to say that any person can become a member of the corporation that conducts this hospital by paying $5, and he can be-

come a life member by paying $50. Those who furnish private wards are all made life members."

A Reception Was Held.

Following these addresses, a reception was held. The Calgary Rifles Band provided a concert, and luncheon was served by the Ladies' Aid. The women comprising the Reception Committee were Mrs. Pinkham, Mrs. Pearce, Mrs. Herdman, Mrs. Allan, Mrs. Lougheed, Mrs. Jamieson and Mrs. Lafferty. As the guests entered the building they were greeted by Mr. John Cardell of the Hospital Board, and the matron, Miss Scott.

Lieut. Gov. Bulyea while in the city was the guest of President Allan, who, with Sheriff I. S. G. Van Wart, accompanied him to the hospital in a carriage.

Many of the guests made the trip in automobiles or buggies, but hundreds walked. Ideal weather of the afternoon made the trip enjoyable no matter how taken. A large number of the women interested in the hospital came loaded down with linen for use in the buildings. This much desired equipment was received by a committee consisting of Mrs. Cross, Mrs. Woods and Mrs. Basil Hamilton.

A glimpse at some of the private wards furnished completely by local citizens was indeed enough to make a person with a penchant for luxurious surroundings envy the sick. The finish of every private ward could not be excelled, with its fine light and white, cheerful walls, and when to this was added rich oak or mahogany furniture and a dozen or more little things that go to make a room seem homelike, the effect could not be excelled. Following is a list of the persons and firms who furnished private wards:

Dean Paget, Mrs. Lougheed, John Hamilton, Mrs. W. R. Hull, Mrs. I. S. G. Van Wart, Hughes Meat Market, Campbell, Wilson & Horne, Ltd., Maritime Province Association, Perfection Lodge A. F. & A. M., United Commercial Travellers, Mrs. William Robertson, Graveley & O'Neil, The Molsons Bank, C. D. Taprell, G. F. & J. Galt, H. A. Perley, Mrs. R. J. Hutchings, W. R. Brock & Co.

Those who saw the hospital were so pleased that the W. C. T. U. and twelve other parties signified their intention of furnishing private wards. Among the physicians who took advantage of the occasion to visit the new hospital were Dr. Sanson, Dr. Gow, Dr. Pope, Mr. Mackid and Dr. Stewart Mackid, Dr. Sisley, Dr. Estey and Dr. Gibson.

Other persons present were the following: Hon. W. H. Cushing, E. H. Riley, M.P.P.; Building Inspector Harrison, Justice C. R. Mitchell, Mr. J. S. Van Wart, Chief of Police Mackie, Bishop and Mrs. Pinkham, City Engineer Child, Capt. and Mrs. Dean, Chief Dispatcher A. Allan, of the C.P.R., Mr. and Mrs. John Emerson, Mr. and Mrs. Berkinshaw, Mrs. Lougheed, Mrs. Robertson, Misses McLeod, Mrs. William Pearce, Mr. Shouldice, Secretary Arthur of the Hospital Board.

The following delightful letter from the Superintendent, Miss Scott, though not intended for publication, is so good that we cannot deprive our readers of a single word:—

March 10th, 1910.

Dear Dr. MacMurchy,—Your letter of 25th Feb. arrived a few days ago, but your former letter I never received.

I am so busy and so tired that it is difficult to write or even remember what happened at the opening of the Hospital. I wish I had received your first letter when I was still red-hot with excitement, and before I had reached the stage of weariness.

The Hospital was opened on 1st Feb. at 3 p.m. by Lieut.-Gov. Bulyea, of Alberta. The day was one of glorious sunshine, every peak of the Rockies stood out sharp-cut against an azure sky. Fresh snow carpeted all the uneven heaps of rubbish and unsightly stuff left by the workmen, and so everything was beautiful in the sky above and the earth beneath; also in the building inside.

About 2 p.m. the city began to move towards the Hospital. I never saw so much interest in Calgary over anything before. The people were taken by street car to within half a mile of the Hospital, and from my station at the front door, I could watch the black crowd wending its way upwards, in an unbroken stream until after four o'clock. The Vice-President of the Hospital Board, Mr. J. Cardell, and myself, received the visitors at the front door. We felt as the American President must after a reception—our arms ached from shaking hands. The Ladies' Aid Society of the Hospital sent out cards of invitation to a linen shower, so the greater number of ladies brought a parcel of linen.

The Lieutenant-Governor arrived at 2.30, and accompanied by Mr. Allan, President of the Hospital Board, and Col. Walker, Chairman of the Building Committee, inspected the entire Hospital. The opening ceremony was held in the women's large public ward, where a platform was erected and the large band of the Calgary Rifles played splendid music all afternoon. The Lieutenant-Governor was presented with a golden key on declaring the Hospital open. I did not hear any of the speeches as I was kept shaking hands until long after the ceremony was over. After the ceremonial part was over the representatives of the Ladies' Aid served tea and coffee and delicious refreshments to all.

The scene was a brilliant one. The beautiful weather invited everyone to wear smart clothes, and the uniforms of a dozen nurses, who assisted in serving contrasted with the pretty frocks of the other assistants. The fresh whiteness of the Hospital rooms and corridors, all flooded with Alberta sunshine, was charming in effect. Everyone was glowing with enthusiasm about the splendid equipment of the Hospital, about the fine building itself and its magnificent situation.

The day following the opening, Wednesday, 2nd Feb., all the maternity patients who could safely be removed were taken over in the ambulances; and a head nurse installed in charge of the General Department of the Hospital to receive any new patients who might be sent in. It was a race among the doctors as to whom should fall the honor of the first patient, the first operation and the first birth—a different man succeeded in each case; and one young doctor announced that he had the distinction of having the first death.

On the 3rd Feb., all the patients from the Medical and Surgical Wards were safely transferred by the ambulances, each patient was accompanied by a nurse. No ill effects were felt by any patient. By Thursday night the entire

staff of nurses were in residence in their new quarters. But what remained still to do was the hardest part—moving and distributing the furniture and appliances and arranging the places that the old should occupy—we were maving from a cottage to a palace and adaptation was rather hard. However, the entire matter was left in my hands. I was not even told to move the patients. No one interfered with a suggestion. But I had been thinking and planning for this for more than a year, and I knew what every corner in the new Hospital was to be for and had a place decided for each thing old and new. I also had been allowed to order all the appointments and surgical appliances which were new, so I knew exactly what we had and for what use and department. But it was a terrible task I shouldered. I had to sleep and spend the forenoon at the old building and the afternoon at the new one. Everything went smoothly from the first, and no doctor or patient suffered the least inconvenience from the effects of the change. To make matters worse, two days after we started to move my most valuable head nurse took measles and had to go to Isolation.

I also gave a dance at the old Hospital, the proceeds of which were to go to help to furnish the Nurses' rooms, and the result was $300. I was able to establish a pretty library and furnish their parlor in mission furniture.

Our staff was increased by twelve probationers, and decreased by the graduation of two seniors, within two weeks of moving.

I have written you a very long story, but you will take out the facts you want and the rest will simply interest you because it was my accomplishment. I went about the whole business as methodically and precisely as I had arranged it in my mind, and it worked out just wonderfully—so easily did everything go that no one here has any idea that there was anything to accomplish worth speaking about.

I have tried everywhere to get photographs for you, but so far I have been unsuccessful; but if I do get one I will send it at once. I hope this letter will be in time for the purpose you want it, and also that some of the things I have told you are what you wished to know.

My kindest regards go to you, and I assure you it is very nice to know that some one in Toronto can shut her eyes and see where I am. I hope to go east some time this summer, and I shall look forward to seeing you then.

Yours very sincerely,

JESSIE T. SCOTT.

THE CANADIAN HOSPITAL ASSOCIATION.

The annual meeting of this association, held in the Nurses' Home of the Royal Victoria Hospital of Montreal on Monday and Tuesday, April 28th and 29th, 1910, was no doubt the most successful yet held by the association. The perfection of the surroundings, in a beautiful lecture room, within one of the finest hospitals in Canada, occupying a site up on the mountain which any hospital might well envy, and the kindness of Mr. Webster, the President, and of everyone connected with the hospital, secured at once the comfort and happiness of the guests and the success of the meeting.

Among those present were: Miss Brent, Sick Children's Hospital, Toronto; Dr. Dobbie, Toronto Free Hospital; Dr. Boyce, Kingston General Hospital; Miss Green, Belleville General Hospital; Miss Robinson, Supt. Galt General Hospital; Miss Tolmie, Brantford General Hospital; Miss Conroy, Glace Bay Hospital, N.S.; Dr. Beatty, Supt. Grace Hospital, Toronto; Miss Miller, Supt. St. Thomas Hospital; Miss Uren, Supt. St. Catharines G. and M. Hospital; Miss McFadyen, Supt. Protestant Hospital, Sherbrooke; Mrs. Staebler, Supt. City Hospital, Stratford; Dr. Brown, Supt. T. G. H., Toronto; H. G. Tynor, Supt. Western Hospital, Montreal; Miss M. Maloney, Supt. Jeffrey Hale Hospital, Quebec; Dr. and Mrs. R. W. Bruce Smith, Toronto; Miss Smith, Supt. Guelph General Hospital; Mrs. J. N. E. Brown, Toronto; Mr. J. S. Parke, Supt. M. G. H., Montreal; Miss Dela Matur, McColl's Hospital, Peterboro; Miss Macgregor, McColl's Hospital, Peterboro; Miss N. McLennan, Supt. R. H., Barrie; Miss M. Y. E. Morton, Supt. G. and M. Hospital, Collingwood; Mr. and Mrs. Hewson, Niagara Falls; Dr. Helen MacMurchy.

We have pleasure in presenting to our readers several of the most important addresses and papers of the Conference, and we hope to publish others later on. The address of the President, Mr. Webster, Supt. of the R. V. H., was a kind welcome, and Mayor Guerin, who came in shortly afterwards, made a short and cordial address, telling the delegates that Montreal was honoured by their visit and promising that everybody would do all that was possible to make the meeting pleasant.

The demonstration, given in the R. V. H. theatre on the first morning, was admirably done, and very greatly appreciated. First, Miss Ponton and Miss Tait showed how to turn the mattress without taking the patient out of bed, and then Miss Duclos and Miss J. Robertson showed how to prepare a room in a private house for an operation, using nothing but what is generally found in any house. This was a particularly fine demonstration, and Miss Fetler, the O. R. Charge Nurse, may well be proud of her pupils.

Luncheon was then served in the Home, a great privilege and pleasure, and the nurses that were in charge of us were ideal hostesses. It was in every way a delightful incident of the day. The Superintendent, Miss Hersey, was most kind and attentive all through the two days of the meeting.

In the afternoon Dr. Royce, K. G. H., gave a paper on Noise that was one of the best presented at the meeting, and Dr. Dobbie described several inventions and devices for use in hospitals. Dr. Helen MacMurchy gave a brief address on Social Service, and then the association were escorted by the President and Mr. Parke to the M. G. H., where we saw a number of the wards of this great hospital. Afterwards we had tea in the Nurses' Home, and spent a delightful half hour with Miss Livingstone, the Superintendent at the Nurses' Home. The Montreal General is being entirely rebuilt, but even that did not for one moment make any difference to our kind welcome.

The evening was devoted to papers on Hospital Construction, by Mr. Parke, M. G. H.; Mr. Sturm, of Chicago, and others.

On Tuesday important papers were presented by Dr. Holmes, of Cincinnati, on "The Hospital Unit"; Dr. Barnhardt, of New York, on The Nursing of the Insane; and Dr. Chipman, of the Royal Victoria, on The Hospital from

the Surgeon's Standpoint. The association were again the guests of the R. V. H. at luncheon, and in the afternoon the meeting concluded by a most interesting visit to the Longue Point Hospital, conducted by the Sisters of St. John. Everyone thought this a wonderful place and its management marvellous.

The officers for the ensuing year are: President, Miss Green, Supt. Belleville General Hospital; Secretary, Dr. J. N. E. Brown, Toronto; Treasurer, Mrs. Curry, Toronto.

On the invitation of Mr. Hewson, the next meeting will take place at Niagara Falls, Canada.

HOSPITAL ACCOUNTING.

Every year it becomes more evident that every hospital superintendent who wishes to make good must give more than a little attention to the important subject of hospital economics. In view of the annual deficits so often reported, the importance of checking waste in any department is one of the urgent problems confronting hospital management. Every contributor to the funds of an hospital has a right to know that the revenue will be carefully and prudently expended. The generosity of the public can be retained and stimulated by every hospital demonstrating by its methods of management that as far as possible waste is prevented and every dollar made as far as practicable to do full service. The resources of a hospital are a public trust and they must be guarded and used as such. Millions of dollars are now expended annually for the support of Canadian hospitals and on that account it would seem desirable to have a uniform system of hospital accounting that would afford a more easily understood comparison in regard to all expenditures. Every hospital should have ready at all times for inspection a stock sheet, balanced at least monthly, showing everything used in the institution so that it could be seen at a glance how expenditures are made and the care and disposal of all purchases. Experience has taught me that a uniform system of accounting is greatly to be desired in our Canadian hospitals. On account of the diversity of methods employed at present it is no easy task to compare the financial management of one hospital with another. If through the influence of this Association a uniform system can be devised and adopted for each institution it would be much more satisfactory than the diversified methods now in vogue.

The hospitals for the insane in Ontario are entirely under Government control and the expenditures of these institutions are carefully audited by an accounting staff at the department. A spread sheet showing every item of expenditure is prepared each month so that the superintendent is kept posted, not only on the amounts expended, but is able to see at a glance what the same items are costing in similar institutions in the Province. This method of central control over all expenditures has been in operation for two years, and the gratifying success which has been attained leads us to believe that the system has many advantages.

Synopsis of Cost-Accounting System in Use in the Department of Asylums and Prisons.

Purchasing.

A quarterly requisition approved by the Medical Superintendent and Bursar is forwarded to the department for the Inspector's approval. The Bursar then purchases, using Order Form 35—in triplicate, one copy being sent to the merchant, one to the department, and the third held in the Bursar's office until checked with the invoice, when it is filed.

Receipts of Goods.

Good purchased are received by the storekeeper and checked with the invoice which must bear his signature and stamp as to receipt and entry in his stock-book. Sheet F, No. 1. The Bursar then certifies on the invoice as to the accuracy of prices and extensions.

All invoices are made in duplicate, one copy being forwarded to the department for payment.

Stock Book.

The storekeeper keeps separate accounts in his stock book of every class of goods coming into the store, which accounts are changed with the quantities received and credited with the quantities taken out on requisition. Hence the stock book must show at all times the actual stock on hand. This is verified quarterly when an inventory of the actual stock is forwarded to the department for comparison with the accountant's ledgers.

Mercantile Accounts.

All invoices are entered in the accountant's department on a special spread sheet (Form No. 10) for the various institutions, and in the corresponding ledger. From the latter a list of such mercantile accounts, approved by the Accountant, Inspector, and Provincial Secretary, is forwarded monthly first to the Audit Department and then to the Treasury Department for payment. From there cheques are mailed to the various banks. Cheques are then issued by the Accountant, signed by himself and the Inspector, and forwarded to the Bursar to be countersigned and mailed to the payees.

Journal entries for the month's accounts show charges to the various ledger stock and expense accounts, and the analysis of such items according to the several appropriations.

Requisitions for Supplies.

All requisitions approved by the Medical Superintendent, Form 7, (Daily, for provisions) and Form 36 (for all other supplies) are made to the storekeeper in duplicate, the copy being forwarded to the department and the original filed by the storekeeper after entry in his stock book. These requisitions are then summarized in the Accountant's Department and Journal Entries made monthly. The Spread Sheet in use for the summary of Form 7 is Form 11, a plain ruled sheet being used for Form 36.

Salaries.

Pay sheets for the several institutions are made in triplicate by the Accountant, one copy being sent to the Treasury Department and two copies

to the Bursar. Covering cheques are then issued by the Provincial Treasurer to the several banks affected. Cheques for the total amounts signed by the Accountant and Inspector are then issued by the Bursars of the various institutions. The latter make cash payments to the staff and return one copy of the pay list duly receipted by the payees.

Other Charges.

The charge for consumption of coal is made from weekly returns, Form 21 furnished by the Chief Engineer of each institution.

In the case of medicines, office expenses, and several miscellaneous items, the consumption is considered the equivalent of the expenditure.

Daily returns, Form 24, of milk production, are made to the department.

Garden produce and fodder grown on the farm are charged against the cost of maintenance during the summer from Form 37, and during the winter, after the storage of crops, from Forms 7 and 36. For this purpose a uniform value is fixed by the Department.

In the case of accounts received quarterly for electricity, gas and water, a pro rata charge is made monthly against the cost of maintenance.

Quarterly Statement.

At the end of each quarter the Accountant compiles a statement of the cost of maintenance per capita per day based on actual consumption, showing comparison not only of one institution with another, but also of each institution in the present year as compared with the corresponding period of the previous year.

At the end of the year a deduction from the gross per capita cost is made for the value per capita per day of all produce of the farm and garden which had been charged against maintenance throughout the year.

Methods at Toronto General Hospital.

The system of accounting in use in the Toronto General Hospital is a combination of triplicate requisitions with card index and vertical filing system. All goods are ordered and distributed by means of triplicate requisitions and the receipt and distribution of any item can be traced by means of the card index.

When a department requires goods from outside the hospital the head of such department makes out a list of goods in triplicate (Form No. 1 attached) with the name of the firm from whom it is proposed to order the goods and the price to be paid. This requisition is submitted to the Superintendent who signs it, if approved. The white slip is retained by the Superintendent and filed. The pink slip is placed in a box which is cleared several times daily by the receiving clerk, and the yellow slip is retained by the head of the department.

The receiving clerk places the pink slip in his file to await the receipt of the goods. When these are received the receiving clerk checks them with the invoice or delivery note and with the requisition. The goods are then for-

warded to the department ordering, checked with the invoice, which is O'K.'d as to quantities and prices. When the invoice and requisition are returned to the receiving room the goods are entered on the requisition as shown and also in the receiving book (Form No. 2 attached). Each shipment is numbered consecutively in the receiving book, and the same number is marked on the requisition against the goods received. The firms supplying goods have instructions that each shipment must be accompanied by an invoice or delivery note and where this rule is not complied with the goods are liable to be returned. In case of goods coming in before the requisition reaches the receiving clerk, he holds the goods pending enquiry and informs the department concerned. If no requisition is forthcoming by next morning he submits a list of goods held back to the Superintendent, who makes enquiry as to the cause. After being entered up the invoice and requisition are attached to each other and held in the receiving room until next morning, when they are checked with the receiving book by one of the accountants, who makes out a transfer requisition for all goods not received on partly filled orders and then removes the invoices and requisitions to the accountant's office. Here they are carefully examined and note taken of any informality as to quantity, price, etc., and whether sent in through the receiving room or not, and if the goods coming in correspond with what is authorized. A list of all formalities is submitted to the Superintendent, who communicates with the department concerned.

After the invoices have been O.K.'d as to quantity and price, they are checked by the accountants, all casting out is checked and also addjtions. This being done they are placed in a vertical file with a folder for each firm until the end of the month when they are checked with the statements sent in. All statements are sent in in duplicate, one copy, after being checked and certified as correct by the chief accountant, is approved for payment by the superintendent and passed on to the office of the secretary-treasurer of the Trustee Board for submission to the Board, who authorize the payment thereof. A list of accounts certified is prepared in the accountant's office in triplicate, one copy going to the secretary with the statements, one to the superintendent, and one being retained in the office. These lists show the analysis of each statement into the departments receiving the goods charged for. The duplicate statements are placed in an alphabetical index file in the accountant's office until each item has been entered on the proper card. When this has been done the statement is placed in the folder in the vertical file. There is a folder for each firm. This gives a permanent record of the goods received from each firm. Discounts other than those depending on the date of payment are deducted by the secretary before forwarding the cheques. The secretary prepares a list for the Board and discounts shown therein are deducted before arriving at the cost per capita per diem. A book is kept in which all goods returned are entered.

The issue of goods from the stores to any department or to the wards is controlled by triplicate requisitions which are made out and signed by the person needing the goods and countersigned by the superintendent. In the

case of a requisition made out by a nurse, it has to be approved by the superintendent of the training school before submission to the superintendent. (Copies of the various interior requistions Nos. 3 to 6 are attached). After being countersigned the white slip is sent to the department issuing the goods, the pink is retained by the Superintendent and filed, and the yellow is held by the person ordering the goods. The stock and supply requisition is used for obtaining goods from the linen, surgical supply and delf departments. The small "Special" requisition (No. 7) is used for all made up surgical dressings, such as wipes, pads, etc., and is not countersigned by the superintendent; but if used for obtaining linen, delf, provisions, etc., should be countersigned as usual. All supplies with the exception of provisions, drugs and made up dressings are issued on weekly requisitions, but the three mentioned are issued daily. In the case of linen, delf, rubber goods, and instruments, the worn out article is sent in to be replaced by new, and these items are marked "Exchange." Before the superintendent countersigns the requisitions they are sent to the accountant's office where each item is compared with previous rquisitions and where necessary a note is made on the white and yellow slips to draw the attention of the superintendent and the nurse orderig the goods (a copy of a comparison sheet is attached, No. 8). In the case of linen, delf and surgical supplies, every item is subject to this comparison, but for drugs and stationery only the principal items are noticed. The daily requisitions for provisions, Nos. 9 and 10, are not subject to comparison in the accountant's office, but are examined by the steward and superintendent. The nurse's per capita (Form No. 11) will be found a great aid in arriving at a scale of supplies required for various groups of wards. This sheet shows the quantity per capita per diem used in various wards of ten principal items of supply. This also shows the economy or extravagance of a nurse in particular items.

Two varieties of cards are used (Nos. 12 and 13). No. 12 shows the quantity of goods coming in, price, name of firm, and amount for all goods, the stock at the beginning of the month, stock at end of month and quantity used. One of these cards is used for each item in use in the hospital where a definite stock is taken monthly. The other card, No. 13, is used for goods or any other accounts which are charged out straight away to some department and where no stock is kept. In the case of linen, delf, surgical supplies, instruments in stock, rubber goods, alcohol, carbolic acid, etc., stock is taken monthly. In the stationery and rug departments the quantity used is estimated each month and this is checked by taking stock say once in six months.

Separate card indexes are kept for all the various heads included in the per capita sheet (see below) and each index contains a card for every item supplied.

By summarizing the requisitions a close check can be made of the stocks taken each month, the quantity shown by the card as having gone out after deducting the stock on hand should agree with the quantity going out as shown by the summary of requisitions. In the case of an article purchased at different prices, the goods are treated as going out in the order in which they come in. A copy of the form of stock book used is attached, Nos. 14 and 15.

After entering on the cards all goods received during the month and any other payments made, and pricing out and entering all stocks, the quantities shown as being used are summarized under the headings shown on the per capita sheet (No. 16) and entered thereon. These amounts are then divided by the total number of days in hospital of all patients. These calculations give the cost per capita per diem for each item or department. In arriving at the total cost all items included in the secretary's list (mentioned under "Filing Statements") which do not appear on the accountant's list, are added, also proportions of cost of gas, water, telephone, etc. In addition to these items there are other items which are apportioned over several months, viz., insurance, nurses' badges, heavy items of repairs, costly apparatus, which have to be included; debenture interest is not included. In order to check the total cost per month as arrived at from the cards, take the total cost per month, plus the total payments, and deduct the stock at the end of the month, to this should be added proportions of items already paid. This result should be the same as that obtained from the cards.

In addition to the per capita sheet shown, two large sheets are also prepared which show each item in one long column and there are 13 columns ruled for figures, one sheet shows the cost of each item per month, and the other the cost per capita of each item monthly. The 13th column contains the total of each item for 12 months. This shows the variation in per capita cost from month to month. The graphic chart system could be made of great use in illustrating this, but is not in use in this hospital.

In arriving at the cost of various supplies, part of which are imported in order to make a comparison between prices actually paid and a quotation for goods laid down, a sheet ruled as No. 19 is most useful. The one illustrated is used in arriving at the actual cost of surgical dressings imported from England.

R. W. BRUCE SMITH.

NOISE.

Before proceeding to discuss this subject of "Noise," it is desirable that we should know exactly what is implied. The Standard Dictionary defines it as a sound of any kind, but especially one of a disagreeable nature.

My attention was forcibly called to this subject by an incident reported by a leading specialist of one of the cities of Ontario who had just returned to Toronto. While visiting one of the homes for the nervous in that city he said he was much impressed by the almost absolute silence of the place. What impressed him most was the whispering tones in which his questions were answered by those accompanying him and by a courteous request to modulate his own voice. "Surely," thought the doctor, "this is an ideal atmosphere for nervous patients. But why is it not essential for the best results in the treatment of any type of disease.

"My," I thought, "how dfferent are the conditions subsisting in our hospitals, although 'silence' as a printed word may be prominent upon our door

posts and lintels it enjoins a law honored more in the breach than in the observance.

Have you not heard the slamming of the door, the doctor's stentorian "Good morning," the stumbling of the visitor as he slowly mounts the stair, the laughing chatter of some idiotic house surgeon or sillier nurse, the moaning of the operative, the crying of children, the whistling of the staff and the thousand other noises which may be within our walls. But let us ask ourselves the question, do we really hear them or have we become so accustomed to the commotion that it goes on all unnoticed. It seems to me we are much like the inhabitants of that Scottish city in which the incessant noise of steam hammers and the clangor from boiler plates created a din deafening to the unaccustomed ear of the visitor, but so natural to the natives that when some accident resulted one night in the closing down of the machinery, the sudden quietness produced, every sleeper awoke to find out "what the racket was."

The fact is, ladies and gentlemen, we have never seriously considered the matter. I am free to confess that is true in my own case. Judging from the little I could find written on this subject I think it is one that has been neglected both in theory and practice. At first sight it may seem too trivial to merit serious consideration, but I am convinced after due thought you will agree with me that it is of paramount importance and that the abolition of every unnecessary noise is a crying need in every institution for the care of the sick.

I think if the whole number of superintendents had suddenly to change places with the patients and betake themselves to their cots how long would it be before there would be a revolution.

Imagine a patient from the London Home described by our specialist friend transferred to the conditions I have described would he not say to himself—Exit rest—enter pandemonium.

Let us consider for a moment the case of the pneumonic nearing the crisis or the gasping victim of myocarditis. We all know that every thought as well as every act requires a definite expenditure of vital energy. This expenditure seems directly proportional to the unpleasant content of the thought or act. We who are well know the drain felt after a day in which have occurred three or four irritating or annoying experiences. If we, then, feel such drain how ill can these weak ones bear the waste of the irritation to which they are subjected. Can you not recollect cases in which the balance easily turned was moved against such an one by some of the preventable disturbances we have mentioned.

Have I overdrawn the picture of conditions subsisting in our hospitals on this side of the Atlantic? I hear some say this does not describe things as they are with us. We hope many here can honestly so affirm, but even to these dissenting ones is the consideration of this subject waste time? Can we not all see many ways this disturbing factor "Noise" is preventing the realization of the highest efficiency in our hospitals?

I wish I could leave this paper with these broad generalities as it is. I think the representatives from Canadian and United States hospitals would

acknowledge that it contained material for personal application. It is not a sermon that each can apply cheerfully to the other fellow.

A friend of mine who was a patient in one of the largest hospitals in one of the largest cities of this continent, an hospital that deservedly enjoys a continental reputation, told me that its associations to her would always be crystallized in its personification of not only perpetual motion, but noisy perpetual motion. When this is the impression given by one of the best institutions what would be that made by the rank and file?

But you say how is all this to be remedied? This brings me to a phase of the subject I would gladly escape trying to deal with. Gladstone is said to have always held the breathless interest of his hearers even when dealing with statistics. I never heard of his putting his charm to the test of a monologue on the details of proper hospital construction and management.

Again conditions are so different in each institution that it must work out its own salvation, but I could not see my way clear to closing this paper without briefly referring to a few of the general principles applicable to all conditions, and, perhaps, touching upon a few specific factors in the breaking of that peace which should be characteristic of the buildings in our charge.

First the site for a new hospital should be selected more with reference to its surroundings than to its convenience of access for visiting doctors and friends. It is needless to say it should be removed as far as possible from the roar of city traffic or factory machinery. Where the site is already chosen the governing board should be ever alert to prevent the coming of undesirable neighbors and to seize every opportunity for the removal of such as are already too near.

Secondly, much of the quiet of an institution depends upon its construction. Hospital architecture has become a science and art by itself. And in a new building or even in remodelling or changing an old one, the most expert direction should be secured. Floors can now be laid so as to be non-conductive of sound, doors hung with noiseless automatic checks and springs, windows to glide smoothly on large ball bearing pulleys, walls to confine sound to their own enclosures.

These attainments are beyond the ordinary house contractor and should not be expected from him.

Thirdly, in arrangement of departments much may be accomplished even in an old hospital by readjustment. The medical and surgical wards should be separated from each other. A recovery room will be necessary off each surgical ward in order that convalescents and others may not be subjected to the depressing influence of the operative recovering from chloroform. For obvious reasons obstetrical and children's wards should be in a separate building. The lying-in room should be situated in part of the building where its sounds cannot reach the ear of other patients. Ward pantries should be far enough away from the rooms that the sound of washing dishes will be inaudible. Again if there is one thing more than another which patients complain of it is the constant ringing of bells. Replace them with the Sturm Electric Light Signal System.

Fourthly (and you will be relieved to hear me add lastly) is the most important factor of all—the personnel of the staff. Let us begin with the superintendent. This official should teach by precept and example that quietness is the one thing needful in the best interests of all concerned. Frequent visits to the wards of the institution will have a good effect in preventing any disturbance. Disorderly conduct on the part of any individual in the hospital must not be tolerated.

Next, I consider the interne. A conscientious faithful one is one of the most valuable assets an hospital can have. His influence for calmness and quietude will be far reaching, while that of one who is foolish and frivolous will work for disorder and mischief. A great difficulty met with is the self-importance and over-confidence of the recent graduate interne. He illustrates the words of Goldsmith, "For e'en though vanquished he could argue still, while words of learned length and thundering sound amazed the gazing rustics ranged around, and still they gazed and still the wonder grew that one small head could carry all he knew." One hears him going down the wards walking on his heels as though he had gained considerably in weight since the night he received his degree amid the glare of lights and the singing of his praises for the great work he has just completed. Sad to relate, many a man never recovers from this headswell until after he has left the hospital. This type of man and the jocular one who is never satisfied until he has proved his wit by throwing some nurse into a convulsion of laughter, alike do violence to the quiet decorum of our wards. It is most important, therefore, that great care be taken in selecting men to fill that position.

Of all the individuals connected with an hospital there are none who can do more to disturb its peace or blast its prospects than the nurses, therefore it is of utmost importance that only capable, conscientious women be chosen to fill the ranks of the nursing profession. Lady superintendents should weed out all those who show a lack of sound, sensible, dependable qualities during their probationary days. Even after nurses pass the probationary period, if they persist in disturbing the wards by engaging in foolish talking and laughing with house surgeons or visitors they should be severely reprimanded. One who habitually disturbs her patients in this way does not care for their welfare, hence she will neglect them and doubtless make false records. She is not conscientious and faithful hence the sooner the hospital is rid of her the better for all concerned. We all know a great deal may be accomplished in keeping nurses in check by having a faithful, tactful head nurse in charge of the wards. Not only will she have a good effect in this connection, but every one on the ward will do his or her work in a quieter manner.

By no means is all the unnecessary disturbance made by those who are intra murals at the institution, for many of the disagreeable sounds are made by some members of the visiting staff. Who has not heard two of the jovial sort in the corridors have a good laugh over something, forgetting that they are harassing some poor patient in the adjoining room. Then again shall I venture to say it, have you not heard the wide vocabulary of profanity which some of the physicians and surgeons have, especially when something goes

wrong on the ward. However, in the majority of instances the doctor is a great help in keeping things quiet by wielding an influence over his convalescents, preventing them from becoming too hilarious.

We shall next turn our attention to the visitors. Many of these are so inconsiderate that they create considerable disturbance in walking heavily along the corridors or by loud talking and laughing. It seems to me the only way to deal with this is to limit the hours for visiting, and, secondly, to request them to keep as quiet as possible.

We are all cognizant of our inability to reach perfection and have absolute silence, yet it is not unreasonable to think that each and every one may move closer and closer to that ideal. I am convinced that by eternal vigilance we shall be able to change the atmosphere of our hospitals from that of ceaseless and bustling activity into one of calmness and repose, wherein even the most fastidious neurasthenic will be unable to find a source of irritation and one which every weary sufferer may find rest, sweet rest.

H. A. BOYCE.

THE MONTREAL TYPHOID EMERGENCY HOSPITAL.

The last patient was discharged from the hospital on Saturday, March 26th, 1910, and its existence and work now pass into history. Good history, too, for the interest shown by the citizens, the way in which pressure was applied in the right place, the awakening of the best and kindest feelings throughout the whole community, will not soon be forgotten. The Sisters offered to those in charge to send assistance for the nursing staff, and if necessary, the hospital authorities would have been only too glad to avail themselves of this kindness. Six nurses from Toronto joined the staff, most of them fresh from typhoid work in Cobalt.

The work of the Ladies' Auxiliary Committee was perhaps, especially along the line of "Follow up" and "Social Service" work, as good as any work that was done at all in connection with the hospital. Mrs. Starkey, Mrs. Smillie, of Westmount, and others, devoted themselves to this work with kindness, energy and success.

Indeed, the effect both on patients and on the community was marked. One patient told his nurse that his days in the "Emergency" had done a great deal for him. "Before I came here to the hospital," he said, "I had lost faith in both God and man, and now I have regained both."

One Sunday evening a nurse from the Typhoid Emergency, off duty for a few hours, went to church. But even there her work was not forgotten. What was her surprise to hear the preacher in his sermon tell of a woman who had come lately to a mission church in Montreal. One of the workers asked her why she had come. "It was those nurses at the Emergency Hospital," replied the woman. "When I saw the way they went around doing their work, it made me think there was something in religion."

CANADIAN NURSES' ASSOCIATION.

The regular monthly meeting of the Canadian Nurses' Association was held in the Medical Chirurgical Rooms on Tuesday, the 5th of April, Miss Baikie presiding. After the usual business meeting a lecture was delivered by Dr. Colin Russell on "Infantile Paralysis." It was most interesting and instructive, there having been so many in the city stricken with the disease in the Autumn months of last year. At the close of the lecture refreshments were served and a social half hour spent together.

Miss Baikie, President of the C. N. A., has accepted the position of Lady Superintendent of the Lachine General Hospital.

Miss Georgie Colley, Secretary of the C. N. A., is spending a month with friends in Quebec.

Miss Sutherland, who has been ill with typhoid fever in the Royal Victoria Hospital for six weeks, is recovering and will soon be about again.

A most enjoyable and well attended at home was given by Mrs. Ward-Spence and Mrs. Liddell at 701 Dorchester Street on Tuesday, April 5th. Mrs. Spence leaves shortly for her new home.

EXTRACTS FROM THE REPORT OF THE CHIEF LADY SUPERINTENDENT, MISS MARY ARD MACKENZIE.

THE MONTREAL BRANCH.

One of the nurses of the Montreal Branch goes to Macdonald College once a week to give lectures to the pupils and teachers. The College pays the expenses.

At the beginning of the year this Branch undertook the nursing of the policyholders of the Metropolitan Life Insurance Co. This company has some 80,000 policyholders in Montreal, and they wish to secure the best nursing care possible for them. The same plan is being carried out in Ottawa.

THE LADY GREY COUNTRY DISTRICT NURSING SCHEME.

This was inaugurated at the last meeting of the Board of Governors, and has aroused considerable interest. The plan in outline is to organize Local Associations in country places to supply nurses for the people on the farms, ranches and homesteads. The nurse's headquarters will be in the most central spot possible, from which she will go out to cases five, ten or twenty miles distant. She will combine continuous and district nursing, and it is hoped that she will be not only a nurse to the people of the locality, but also a friend, comforter, teacher and adviser for them. We want the people, especially the women, in those regions of great distances, to grow accustomed to the nurse's visits, when she will take in with her some part of the outside world, cheer them up, comfort them, arouse their interest in something, teach them how to care for their children, how to keep their homes wholesome and clean, and advise them on any puzzling problem which may arise. The first district under this scheme was opened in April, 1909, in Lundbreck, Cowley and Livingston, in Southern Alberta. Miss Mary Macdonald was sent out at the pioneer nurse, and from the beginning she has made a marked success of the Branch.

A post-graduate course in district nursing—four months—is given at one of the three training centres of the Order, at Ottawa, Montreal, or Toronto. For full information, apply to the Chief Superintendent, 578 Somerset Street, Ottawa, to the Montreal District Superintendent, 76 Mackay Street, Montreal, or to the Toronto District Superintendent, 206 Spadina Avenue, Toronto.

Many positions requiring nurses with superior qualifications and marked executive ability are filled from the ranks of the Victorian Order Nurses every year.

The Guild of Saint Barnabas

CANADIAN DISTRICT

MONTREAL—St. John Evangelist, first Tuesday Holy Communion at M. G. H., 6.15 a.m. Second Tuesday, Guild Service or Social Meeting, 4 p.m. Third Tuesday, Guild Service at St. John's, 8.15 p.m. Last Tuesday Holy Communion at R. V. H., 6.15 a.m.

District Chaplain—Rev. Arthur French, 158 Mance Street.

District Superior—Miss Stikeman, 216 Drummond Street.

District Secretary—Miss M. Young, 36 Sherbrooke Street.

District Treasurer—Mrs. Messurvy, 37 Church Street.

TORONTO—St. Augustine's Parish House, 8 Spruce Street, last Monday, 8 p.m.

Chaplain—Rev. F. G. Plummer.

Superior—Mrs. Broughall (pro tem).

QUEBEC—All Saints Chapel, The Close. Guild service, fourth Tuesday, 8.15 p.m.

Chaplain—The very Rev. the Dean of Quebec.

Superior—Mrs. Williams, The Close.

By the kind invitation of Miss Brent, a meeting of the Guild was held at the Nurses' Residence of the Hospital for Sick Children on Monday evening, April 11th. There was a good attendance of members, and a number of the nurses in training were present also. The address was given by the Chaplain, whom we were glad to see benefited by his holiday. A resolution of condolence was passed to Miss Mersel in her recent bereavement. It was suggested that the members should do some practical work, such as making clothing for the poor, and those interested were asked to attend a meeting on the first Friday in May.

My Scallop Shell of Quiet

I Would Be

My Creed.

I would be true, for there are those who trust me;
I would be pure, for there are those who care;
I would be strong, for there is much to suffer;
I would be brave, for there is much to dare.

I would be friend to all—to foe—to friendless;
I would be giving, and forget the gift;
I would be humble, for I know my weakness;
I would look up—and laugh—and love—and lift.

—*Howard Arnold Walters.*

Real Success and Apparent Success.

Elijah's apparent success was in the shouts of Mount Carmel. His real success was in the unostentatious, unsurmised obedience of the seven thousand who had taken his God for their God. Remember the power of indirect influences; those which distil from a life, not from a sudden brilliant effort. The former never fail, the latter often. There is good done of which we can never predicate the when or where. Not in the shining results of an examination does your real success lie. It lies in that invisible influence on character which he alone can read who counted the seven thousand nameless ones in Israel.

F. W. Robertson.

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Editorial

ISABEL HAMPTON ROBB.

The death of Mrs. Robb, one of the great leaders of the nursing profession, a Canadian, the Superintendent of the Lakeside, at Cleveland, and first Superintendent of the Johns Hopkins Training School for Nurses, a loving and beloved wife and mother, by a terrible street accident, was a personal loss to every Canadian Nurse, a sad bereavement to all who knew her, and a deep grief to those who were bound to her by ties of association and friendship.

A memorial service was held in the Church of St. Stephen the Martyr, Toronto, on Saturday April 23rd, at 8 p.m. This tribute was arranged for by the Johns Hopkins Hospital graduates living in Toronto and its vicinity as their loving offering for their deeply mourned and much loved superintendent, whose tragic death in all its horror still remains with us. The service, which was fully choral, was conducted by the Assistant Rector, the Rev. J. S. Broughall, assisted by the Curate. The hymns and psalms chosen were especially symbolic, some of the former having been favorites of the deceased. Mr. Broughall's sermon was very beautiful and was divided under three headings, "Accident," "Sorrow," "Death." In it he spoke of Mrs. Robb's life, and how her religion had been such a factor in her wonderful success in dealing with her sisters, and it brought much comfort to those who are still so keenly mourning her loss. At the conclusion of the service Dr. Doward, who graciously gave his services for the occasion, played "The Dead March in Saul," the congregation standing until the close.

The large congregation present consisted of delegates and nurses representing every branch of the nursing work in Toronto; the medical profession being also represented by Dr. Parsons and Dr. MacMurchy, both of whom were associated with Mrs. Robb in Baltimore, while Messrs. John Ross Robertson, Muldrew, and the Rector, Mr. Broughall, and others showed their appreciation of her great life by being present at the last service her sister nurses could pay her.

The funeral service, which was very largely attended, took place at her old home, Welland, on April 19th. No Canadian nurse need be reminded of Mrs. Robb's service to the profession—her leadership, her works on nursing, her foresight and public spirit and deep interest in all the work of a nurse and superintendent. It is for us who remain to live in the same spirit and with the same earnestness.

IN MEMORIAM.

The news of the sudden death of Mrs. Laura Macquoid, on Tuesday, March 22nd, was received with feelings of deepest sorrow by her fellow nurses and friends. Mrs. Macquoid was a graduate of Grace Hospital, Class 1901, and also took a post-graduate course in the General Memorial Hospital, New York. Although not actively engaged in nursing the last three or four years, Mrs. Macquoid was always greatly interested in anything pertaining to the nursing profession. She was President of the Grace Alumnae Association for one year, and was always glad to help advance the interests of the Alumnae. Always bright and cheerful, she endeared herself to everyone who was fortunate enough to know her well, and she will be much missed by a large circle of friends. THE CANADIAN NURSE wishes to express its sincere sympathy with Mrs. Macquoid's family and friends.

THE CHILDREN'S HOSPITAL IN HALIFAX.

This hospital is doing well and always making new friends. Mr. Dennis, the Treasurer of the hospital, reports recently the receipt of the contents of twenty "Mite Boxes," placed in the hotels, banks, ice cream parlors, tea rooms, express companies' offices and stores. The total was about twenty dollars, and in one of the boxes was a ten-dollar gold piece. As Mr. Dennis says:

"Somebody passed along, saw the silent pleader for the children's cause, said to himself that he would see if he had any small change, found that he had, and straightway transferred ot from his purse to the hospital box.

"Now, of course, the value of a mite is relative. It is not always the same size. For instance, that $10 gold piece, which gladdened the heart of the Treasurer when the hospital box in the Bank of Commerce was turned out, could not accurately be described as a mite.

"That was a shining piece of generosity on the part of whoever placed it there.

"Somebody—big or little—the spirit was the same, said: 'Well, I will have to deny myself something which I would very much like to have, if I put my gold piece in the little box, but the children's hospital is worth the self-denial of anybody, so here goes.'

"Have you ever been out to the hospital? No. Well, go and go at the earliest opportunity, and you will find your interest in it and your inclination to contribute mites wonderfully stimulated.

"The little patients are so obviously benefiting by the good care which they are receiving, and are so happy in it, that they are so many arguments, so to speak, in behalf of contributions to the mite boxes, or, indeed, contributions generally."

The Superintendent of the hospital is Miss Frances M. Fraser, graduate of 1903, H.F.S.C., Toronto.

If we are not mistaken, Mr. Dennis is a newspaper man. What a good hospital man a newspaper man makes! Anybody who knows Dr. Stewart, of Winnipeg, or Col. Hugh Clarke, of Kincardine, or John Ross Robertson and Joseph Atkinson, of Toronto, knows that. Dear reader, write and tell us what newspaper man near you helps the hospitals.

ISLA STEWART.

It is with the deepest regret that we record the sudden death of one of the greatest members of the nursing profession. A Highlander and a lady, with real generosity and public spirit, that rare attractiveness and power of affection which characterize her race, she was a true friend, a good comrade, an inspired leader, a patriotic citizen. She was Matron at "Barts" for 20 years. She died, as she lived, on duty, for she had scarcely left the wards for a day or two's rest before she met the Bearer of the Great Invitation. To our sisters in Great Britain, Canadian nurses would express the deepest regret and sympathy. *The British Journal of Nursing* says:

Isla Stewart's claim to greatness lies in this: that she used her high position for no selfish ends, but threw the whole weight of her influence into furthering the welfare of nursing, whether or not the line of action she felt impelled to take seemed for the moment prejudicial to her personal interests. She held higher than any personal consideration her public duty, and the fulfilment of the obligations which her position imposed upon her. A lover of peace, she has lived through the troublous times which so often befall a profession during its evolution, and only in the future can the nursing profession fully estimate its great debt to her for her firm stand for vital principles. For herself she could gain no higher position, no greater honour, but with keen insight and rare unselfishness, she entered the arena of public controversy to further the organization of nursing for the benefit of the sick, and in order that trained nurses, whose work she estimated so highly, might have legal recognition as members of an honourable profession. For her work in this connection her name is honoured to-day throughout the nursing world.

A great patriot, Miss Stewart was a member of the Nursing Board of Queen Alexandra's Imperial Military Nursing Service, and Principal Matron of No. 1 (City of London) Hospital of the Territorial Force Nursing Service; a great public servant, she was President of the Matrons' Council of Great Britain and Ireland, and of the Society for the State Registration of Trained Nurses, Hon. President of the League of St. Bartholomew's Hospital Nurses, a Foundation Member of the International Council of Nurses, an Hon. Member of the National Council of Nurses, the Irish Nurses' Association, the German Nurses' Association, and the American Federation of Nurses, while the *Assistance Publique* of Paris recognized her great services to nursing by conferring on her a special medal. Her body was brought from Chilworth to the mortuary chapel of St. Bartholomew's Hospital, and taken thence to Moffat, N.B., where she will be laid to rest on Thursday, March 10th, at 2 o'clock, and at 3 o'clock there will be a memorial service at St. Bartholomew's the Great, West Smithfield, E.C.

A beautiful account of the lying-in state at the Chapel of St. Bartholomew's, and of the funeral ceremonies, is given in the *British Journal of Nursing*, whose Editor, Mrs. Bedford Fenwick, was Miss Stewart's devoted friend and comrade and was with her to the last.

Miss Stewart's departure was an event of national importance, and this was shown by many signs, from the Queen on her throne, from to the humblest person connected with the hospital she had served so faithfully and the pro-

fession she had adorned and honoured by her great career. And her departure was beautiful in its time and place and impression on all. The flowers sent could hardly have been more magnificent and more appropriate if they had been designed to grace a Royal funeral pageant. From the medical profession, from the hospitals of three kingdoms, and from France, came many to the funeral and stood to reverence the dead in St. Bartholomew's the Great, where sleeps Rahere, the founder of the hospital she had served.

"The service was conducted by the Archdeacon of London; the Rev. H. S. Close, Vicar of St. Bartholomew's the Less, and Chaplain to the hospital, and the Rev. R. Adams, for many years Assistant Chaplain. The sweet old hymns selected were: 'Oh God, our Help in Ages Past,' 'Rock of Ages,' and 'On the Resurrection Morning,' and a short address was given by Archdeacon Sinclair, who spoke of Miss Stewart's strenuous life of duty, her noble example, inspiring influence, and the use she had made of her great gifts. Those, he said, who use well their powers in this life, find wider scope for them in the quiet realm of Paradise, and the life beyond, so we left her with God. It was for those who remained to see that the spirit of her great work still went on.

"As one left the church, glad that all honour should have been paid to the Matron and friend whom we revered and loved, one realized that while position, power, and honourable estate, all are good, they are of secondary importance to the truth, moral courage, straight dealing, and high principle, in the practice of which she set so fine and high an example."

The service in London over, a few near and dear friends and associates accompanied the remains to the far-away hillside in the Highlands, up a steep slope beside Moffatt water, where she was to be laid among her own people.

"As we stood by whilst her relations and friends lowered her, according to the Scotch custom, into her grave, I looked across the little town to the hills beyond and above, some still flanked with snow, and I understood. Isla Stewart belonged to the hills, and she had come back to the hills to rest.

"She had played a fine part in life's game; she had used her talents and her share of life well; for twenty-three long years she had worthily represented the great hospital of which she was Matron—but now she had come home again! We left at peace on the hillside a generous woman—one of the world's best and most conscientious workers, of whom might well be quoted the words she herself used when speaking of our late Queen: 'She feared God and knew no other fear.'

"She would have succeeded in any calling, but having devoted herself to her profession, she threw herself whole-heartedly into its advancement and organization, and spent herself and her talents freely in its service, utilizing to its last ounce her enormous capacity for work.

"Large-minded, she was singularly free from petty jealousy, and had a most generous appreciation for the talents and successes of others; there was no small or mean trait in her being.

"Her sense of justice was great, but her mercy greater. None had a more kindly, tolerant sympathy for human frailty; her charity was boundless; she had a clear brain, but a large heart." *Requiescat in pace.*

LADY DUDLEY'S VISIT.

The visit of Her Excellency Lady Dudley, wife of the Governor-General of Australia, to Canada, which was to have taken place in April, has been postponed on account of Her Excellency's health.

Lady Dudley wishes to establish an Order similar to the Victorian Order of Nurses, to supply trained nurses for the bush country of Australia. The V. O. authorities have been in communication with Lady Dudley for some months, and have supplied her with the V. O. literature. So interested were Their Excellencies, Lord and Lady Dudley, in the scheme, that they asked the V. O. to send a delegate—the Hon. Secretary or Chief Superintendent—to Australia, at their expense, who would explain V. O. principles and help establish a country district nursing scheme for Australia. It is hoped that Lady Dudley will be able to visit Canada in the near future.

MARY BROWN OF VIRGINIA.

Heroism is not rare in the nursing profession, and our esteemed contemporary, *The American Journal of Nursing*, describes a noble instance of it:

"Mary Brown was a native of Virginia, young, trained in a Washington hospital, and but recently graduated. In December last she was engaged to nurse a very sick man in Washington; she had been with him a few weeks and, though improving, he was still in a dangerous condition. One morning late in December she left the sick room and was in another room speaking with the family when the sick man appeared in the doorway armed with a pistol which he leveled and aimed at his wife. Miss Brown started toward him and was shot full in the breast. Mortally wounded, she reached her patient, secured the pistol and took it from him, went into the hall to the telephone and called the doctor to the house."

The brave nurse died a few days later in a Washington hospital. Had she lived, she would have received the Carnegie medal and many other honours. Dying in the morning of her days, in the midst of her promise, and without a stain on her shield, she has shown herself a brave daughter of the brave Southern race, and bequeathed to her sisters an example which will always be an inspiration and an honour to American nurses, and to the nursing world.

KINCARDINE GENERAL HOSPITAL.

Never a week passes but the Women's Auxiliary or the Board of Governors of Kincardine General receive some substantial token of the practical interest of the citizens in their good work. The building is not opened formally yet. The baby came first and opened the hospital himself, and though mother and child are doing well, it was considered that quiet was necessary—and so the opening, for this splendid reason, was postponed. But the staff are on duty, and the baby boy was named "Stanley," after the Superintendent, Miss Stanley.

The second part of the opening ceremonies, which was a concert in the

Opera House, duly took place, and was an entire success. Mr. George M. Mackendrick, President of the Hospital Board, was in the chair, and a large audience seemed delighted with the programme. Dr. R. W. Bruce Smith during the evening made an interesting address. He had that day made an official inspection of the hospital and was delighted with it, and said further:

"The last time I was here was when Mrs. Gualco handed over the site of the hospital and announced the endowment of $25,000. If any one then doubted the wisdom of selecting that site, that doubt must be dispelled now as one visits it after the Board has completed the alterations to the building. It is a magnificent site and I am sure you are all proud of it, and that Kincardine will have even greater pride in the hospital in years to come. There need be no doubt as to its stability. Seventy-three hospitals have received Government aid in Ontario and not one of them has closed its doors. After the first year or two of operation, I never heard any place regret the establishment of an hospital. Hospitals are here to stay. All progressive centres must have them. Simcoe County has four; Huron County has five; Bruce surely can maintain two. The Government grant is 20 cents per patient per day for the first ten years, so that if all your twelve beds are occupied all the year, you would get about $800. Don't rely upon any municipality or any individual. Let the poor as well as the rich feel it is their hospital. Other towns no better favored get on without any endowment. Surely Kincardine can get on when it starts off with the handsome endowment of $25,000 given through the generosity of Mrs. Gualco. One word about the lady directors. I examined the linen and furnishings carefully and they are certainly well chosen and well supplied. With such willing workers among the ladies, the Board should find it easy to make this hospital, so auspiciously begun, a successful institution doing a truly Christian work."

FORWARD.

The Editorial Board at its February meeting decided, after careful deliberation, to start a fund for THE CANADIAN NURSE, with the object of assuming one-third of the financial responsibility in two years. To accomplish this we must raise at least one thousand dollars, but if each nurse in Canada subscribes one dollar, the fund is a reality.

According to the present arrangement the publishers bear the whole financial responsibility, but the Board felt that our position would be improved and more effective work could be done if this step were taken.

Forward, ever forward, is our motto, so let every nurse make the success of our magazine a personal matter, then her interest will prompt her to shoulder her part in this undertaking and thus facilitate the work of the Editorial Board.

Contributions to this fund may be sent to the President of the Board, Miss Bella Crosby, 78 College St., Toronto.

OUR JANUARY NUMBER.

We really need two or three January numbers for 1910. Can you send us one?

EDITORIAL NOTES

THE BRITISH EMPIRE.

Q. A. I. M. N. S.

The Matron-in-Chief, Miss Keer, retires from her great post this month, on account of the regulation referring to age. Miss Becher, who has served under Miss Keer at the War Office for the last seven years, will succeed her. She has been Secretary of the Nursing Board and Examiner on the Central Board. Miss Becher has recently been on a tour of inspection to the Mediterranean stations and to Egypt. She was trained at the London Hospital, and was selected as one of the first nursing sisters to go out to the Souh Africa field. She did excellent work during the war, and was awarded the decoration of the Royal Red Cross.

GREAT BRITAIN.

THE ROYAL NAVAL NURSING SERVICE.

The regulations for Queen Alexandra's Royal Naval Nursing Service are under revision. The publication of the revised regulations will not take place for some time.

LORD CRANBROOK ON ENGLISH NURSES.

At the annual meeting of the Kent County Nursing Association Lord Cranbrook said that we have a better system of nurses and nursing than there is anywhere else in the world. He also spoke of the opinion of a doctor in the south of France who had attended his (Lord Cranbrook's) son recently in a serious illness, and had said that the patient owed his life to the English nurses whom he was able to get there, for since the Sisters of Charity are gone, there are no reliable nurses to be found in France.

The Nursing Journal of India appears in March in a neat brown cover, and contains much interesting reading. We observe that the Government is to appoint two English trained nurses to work as district nurses among the railway employees at Lahore.

The St. Elizabeth Visiting Nurses' Association of Toronto have issued their first annual report. The association was founded as a memorial of the Golden Jubilee of His Holiness Pope Pius the Tenth. The nurses have attended 295 patients during the year and have made 2,120 visits. The report is a neat purple-covered pamphlet and is an interesting record of the work.

The Visiting Nurse Association of Chicago publishes its annual report, a little volume of 50 pages, packed quite full of facts and records of work. The association has been organized 20 years. It was incorporated in 1890, and it is well known to be one of the very best visiting nurses' associations in the world. 20,000 patients, 100,000 visits, 85 nurses to do it, and 40 of them school nurses. This is a record of untold good.

ENGLAND.

NURSES' MISSIONARY LEAGUE.

A series of special meetings, 37 in number, were held by the League during Lent. Results cannot be known, but the presence of the Master was felt. The Nurses' Summer Camp will be held in June, and all who have ever been are longing to go again.

OFFICIAL DEPARTMENT.

Queen Alexandra's Imperial Military Nursing Service.

The Canadian Permanent Army Medical Service (Nursing Branch).

The Canadian Society of Superintendents of Training Schools for Nurses.—President, Miss Brent, Superintendent Hospital for Sick Children, Toronto; Secretary, Miss Scott, Superintendent Grace Hospital, Toronto.

The Canadian National Association of Trained Nurses. — President, Miss Snively, Toronto General Hospital; Sec. Treas., Miss F. M. Shaw, General Hospital, Montreal.

The Association of Hospital Superintendents of Canada.—President, Mr. H. E. Webster, Secretary Royal Victoria Hospital, Montreal; Secretary, Dr. J. N. E. Brown, Medical Supt. General Hospital, Toronto.

The Canadian Nurses' Association.—President, Miss Baikie, 25 Lorne Ave., Montreal; Cor. Secretary, Miss Colley, 25 Hutchison St.; Rec. Sec., Miss Phillips, 45 Argyle Ave.

The Manitoba Association of Graduate Nurses.—President, Mrs. Bruce Hill, Corner Ellice and Carlton Streets, Winnipeg; Secretary, Miss Isabel Gauld, 375 Langside St., Winnipeg.

The Nova Scotia Graduate Nurses' Association.—President, Miss Pemberton, "Restholm," Halifax; Secretary, Miss Kirke, Supt. Victoria General Hospital, Halifax.

The Graduate Nurses' Association of Ontario.—President, Mrs. Currie, 175 College St.; Cor. Secretary, Miss Edith Hargrave, 146 Winchester St.; Rec. Sec., Miss Julia Stewart, 12 Selby St., Toronto.

The Victorian Order of Nurses.—Miss Mackenzie, Chief Superintendent, 578 Somerset St., Ottawa.

The Guild of St. Barnabas for Nurses.

The Brockville Graduate Nurses' Association.—President, Mrs. V. A. Lott; Sec., Miss Margaret Grant.

The Collingwood G. and M. Hospital Alumnae Association.—President, Miss Knox; Secretary, Miss J. E. Carr, Collingwood.

The Calgary Graduate Nurses' Association.—President, Miss Dewar, 824 4th Ave. West; Secretary, Miss Rutherford, 506 4th St. West.

The Edmonton Graduate Nurses' Association.—President, Mrs. R. Knelll; Secretary, Mrs. Mason, 630 Sixth St. Edmonton.

The Ottawa Graduate Nurses' Association.—President, Mrs. H. C. Church, 81 First Avenue, Ottawa; Secretary, Miss Nellie E. Slack, 189 Metcalfe St., Ottawa.

The Fergus Royal Alexandra Hospital Alumnae Association.—President, Miss Pauline Martignoni, Supt. of Nurses, Toronto Orthopaedic Hospital; Sec.-Treas., Miss Trout, Supt. of Nurses Royal Alexandra Hospital, Fergus.

The Galt General Hospital Alumnae Association.—President, Mrs. Wardlaw; Secretary, Miss Adair.

The Guelph General Hospital Alumnae Association.—President, Mrs. A. Anderson; Cor. Secy., Miss J. E. Anderson.

The Hamilton City Hospital Alumnae Association.—President, Miss Coleman; Cor. Secy., Miss Aitken.

The London Victoria Hospital Alumnae Association.—President, Miss Hannah; Secretary, Miss Gertrude Armstrong, care Mrs. Judge, Dorchester.

The Kingston General Hospital Alumnae Association.—President, Miss Frances Wilson, Union St., Kingston; Secy, Mrs. W. J. Crothers, Jr., 86 Barrie St.

The Montreal General Hospital Alumnae Association.—President, Miss K. H. Brock, 59 Park Ave., Montreal; Cor. Secy., Miss S. Ethel Brown, 26 Melbourne Ave., Westmount.

The Montreal Royal Victoria Hospital Alumnae Association. — President, Miss Grant; Secretary, Mrs. Edward Roberts, 135 Colonial Ave., Montreal.

The Ottawa Lady Stanley Institute Alumnae Association.—President, Mrs. C. T. Ballantyne; Secy.-Treas., Miss M. K. Gallaher.

The St. Catharines G. and M. Hospital Alumnae Association—President, Miss L. Tuck; Secretary, Miss E. M. Elliott.

The Toronto Central Registry of Graduate Nurses,—Registrar, Mrs. Downey, 554 College St.

The Toronto General Hospital Alumnae Association.—President, Mrs. A. E. Findlay, 649 Church St.; Cor. Secy., Mrs. N. Aubin.

The Toronto Grace Hospital Alumnae Association.—President, Miss De Vellin, 505 Sherbourne St.; Secretary, Miss Allen, 9 Pembroke St.

The Toronto Graduate Nurses' Club.—President, Mrs. Pellatt, 7 Wells St; Secy., Miss E. Ross Greene, 418 Sumach St.

The Toronto Hospital for Sick Children Alumnae Association.—President, Miss Barnard, 608 Church St.; Cor. Secy., Miss Isaacs, Baldwin St.

The Toronto Riverdale Isolation Hospital Alumnae Association.—President, Miss Mathieson, Supt. Riverrale Isolation Hospital; Secretary, Miss Muriel Gale, Riverdale Isolation Hospital.

The Toronto St. Michael's Hospital Alumnae Association.—President, Miss Power, 9 Pembroke St.; Secretary, Miss O'Mara, 9 Pembroke St.

The Toronto Western Hospital Alumnae Association.—President, Mrs. McConnell, 125 Major St.; Cor. Secy., Miss Butchart, 563 Bloor St. W.

The Winnipeg General Hospital Alumnae Association. — President, Miss Johns, Winnipeg General Hospital; Secy.-Treas., Miss Hood, 367 Langside St.

The Vancouver Graduate Nurses' Association.—President, Mrs. W. F. Salsbury, 1340 Burnaby St.; Secretary, Miss Ruth Judge, General Hospital, Vancouver.

The Vancouver General Hospital Alumnae Association. — President, Miss M. Beharrel, Asst. Supt. V.G.H., Vancouver; Secretary, Miss M. Wilson, 1657 Burnaby St., Vancouver, B.C.

The Victoria Trained Nurses' Club—President, Miss Keast, Carberry Gardens; Secretary, Miss Ethel Morrison, 1442 Elford St., Victoria.

QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

The following ladies have received appointments as Staff Nurses:—Miss B. Jackson, Miss M. McCormick, Miss M. T. Casswell.

Postings and Transfers.

MATRONS.

Miss M. C. S. Knox, R. R. C., to Military Hospital, Cork, on return from South Africa.

SISTERS.

Miss H. L. A. Jack, to South Africa, from Royal Herbert Hospital, Woolwich.
Miss M. Smith, to South Africa, from Cambridge Hospital, Aldershot.
Miss A. F. Byers, to T. S. "Plassy" for duty, from Royal Infirmary, Dublin.
Miss L. E. C. Steen, to Royal Victoria Hospital, Netley, from Military Hospital, Cork.
Miss R. Osborne, to Royal Herbert Hospital, Woolwich, on return from South Africa.
Miss M. M. Blakely, to the Queen Alexandra Military Hospital, Grosvenor Road, London, S.W., on return from Egypt.

STAFF NURSES.

Miss C. V. S. Johnson, to South Africa, from Military Hospital, Hounslow.
Miss V. C. Paschali, to South Africa, from Military Hospital, Dover.
Miss M. H. Congleton, to South Africa, from Military Hospital, Dover.
Miss M. E. Smith, to T. S. "Plassy," for duty, from Royal Herbert Hospital, Woolwich.
Miss G. H. C. Paynter, to T. S. "Plassy," for duty, from Military Hospital, Devonport.
Miss F. E. Manfield, to Military Hospital, Cairo, on arrival in Egypt.
Miss I. J. Pooley, to Egypt, from Connaught Hospital, Aldershot.
Miss M. A. McCabe, to Military Hospital, York, from the Queen Alexandra Military Hospital, Grosvenor Road, London, S.W.
Miss E. J. French, to Connaught Hospital, Aldershot, from the Queen Alexandra Military Hospital, Grosvenor Road, London, S.W.
Miss E. H. Davies, to the Queen Alexandra Military Hospital, Grosvenor Road, S.W., from Military Hospital, York.
Miss M. McCormack, to the Queen Alexandra Military Hospital, Grosvenor Road, S.W., on appointment.
Miss M. T. Casswell, to the Queen Alexandra Military Hospital, Grosvenor Road, S.W., on appointment.

Appointments Confirmed.

STAFF NURSES.

Miss K. M. Burgess, Miss W. Halloran.

E. W. BECHER,
For Matron-in-Chief, Q.A.I.M.N.S.

THE GRADUATE NURSES' ASSOCIATION OF ONTARIO.

(INCORPORATED 1908).

President, Mrs. C. J. Currie, 175 College street, Toronto; First Vice-President, Miss E. J. Deyman, 87 Victoria street south, Hamilton; Recording Secretary, Miss J. Stewart, 12 Selby street, Toronto; Corresponding Secretary, Miss E. Ross Greene, 418 Sumach street, Toronto; Treasurer, Miss Mary Gray, 505 Sherbourne street, Toronto. Board of Directors—Miss L. C. Brent, Hospital for Sick Children, Toronto; Miss Florence Potts, Hospital for Sick Children, Toronto; Miss K. Mathieson, Isolation Hospital, Toronto; Miss Donnelly, 608 Church street, Toronto; Miss E. Muldrew, 10 Roxborough street west, Toronto; Miss E. Rogers, Palmerston Boulevard, Toronto; Miss M. Barnard, 608 Clinton street, Toronto; Miss M. Kennedy, 1 Lakeview avenue, Toronto; Miss J. Neilson, 295 Carlton street, Toronto; Miss McNeill, 505 Sherbourne street, Toronto; Miss E. Jamieson, 105 Macpherson avenue, Toronto; Miss J. Wardell, 171 Delaware avenue, Toronto; Miss Irvine, 9 Pembroke street, Toronto. Standing Committees—Legislation, Convener, Miss J. Wardell; Revision of Constitution and By-laws, Convener, Miss M. Kennedy; Publication, Convener, Miss J. Stewart. Representatives to "Canadian Nurse" Editorial Board, Miss A. J. Scott, Miss Jewison; Representatives to Local Council, Misses Neilson, Wardell, Irvine and Smith.

The annual meeting of the association will be held on Tuesday, May 24th, 1910, at the Residence, Hospital for Sick Children, College Street, Toronto.

2 P.M.

1. Prayer.
2. Opening address.
3. President's address.
4. Routine business, reports of Secretary and Treasurer, reports of Committees.
5. Voting on proposed changes in Constitution and By-laws.
6. Miscellaneous business.
7. Announcement of elections.
8. Report of work of Heather Club.
9. Demonstrations by Miss Potts, Assistant Supt. Hospital for Sick Children, hot pack for nephritis, continuous saline with patient in Fowler's position.

8 P.M.

1. Paper by Miss Janet Neilson on "The Work of the Visiting Nurse Among the Tuberculous Poor of the City."
2. Registration for Nurses, by Mrs. Mill Pellatt.
3. Discussion.

A reception will be held on Monday evening at the residence of the President, Mrs. C. J. Currie, 175 College Street, for the members of the Graduate Nurses' Association of Ontario, the Canadian Society of Superintendents of Training School, and the Canadian Hospital Superintendents' Society.

CORRESPONDENCE.

FROM A CANADIAN NURSE IN NORTH CAROLINA.

To the Editor of THE CANADIAN NURSE:

Dear Madam,—I wish I were gifted, so that I could give you a real picture of this country and people. The country is lovely; the profusion of flowers is something marvellous. Have you ever had the pleasure of seeing a whole mountain side covered with laurel and rhodendron in full bloom If not, come down to North Carolina in June and steep your soul in beauty. One cannot describe it; one can only see and feel. The beauty of the country and the few warm friends are more than compensation for many things not to be had, and I am happy here. I must not weary you, but thought you might be interested to know a little about the people here. Much as I like this land, Canada is my home, and letters from Toronto are particularly valued.

Yours,

N. G. D.

To the Editor of THE CANADIAN NURSE:

Dear Madam,—For some time I have been intending to write to the CANADIAN NURSE on my work here. I was engaged by the McClary Manufacturing Co. in November of 1909 as a Welfare Nurse. And it is my duty to visit or care for any sick member of the families of their employees and to report any unhygienic condition in their homes.

There are between 800 and 900 men and women employed at the factory. There is a small emergency hospital connected with the factory, furnished with everything needful for emergency work. I have regular hours for visiting outside patients and emergency hospital. These people are free to call upon me any hour during the day, and in very urgent cases at night. I have reported since November 1st eight major accidents, others being slight cuts; ninety-four house calls, and two hundred and fifty cases at the factory. I find my work very interesting, and trust it will continue to be so.

Yours respectfully,

(MRS.) M. REYNOLDS.

132 Central Ave., London, Can.

GRACE HOSPITAL ALUMNAE ASSOCIATION.

President—Miss DeVellin.

First Vice-President—Miss McKeown.

Second Vice-President—Miss McMillan.

Secretary—Miss Allen.

Treasurer—Miss Wixon (by acclamation).

Board of Directors—Miss Carnochan, Miss Monery, Miss Soane, Miss Etta MacPherson and Miss Thompson.

Social Committee—Miss Shatford, Mrs. Corrigan and Miss Webster.

Sick Committee—Misses Irvine and Gibson.

Convener of Programme Committee—Miss McMillan.

Convener of Press and Publicity Committee—Miss Bell.

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Wherever inflammation or congestion is a factor, Antiphlogistine is indicated and should always be applied warm and thick and covered with absorbent cotton.

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THE ALUMNAE ASSOCIATION OF THE COLLINGWOOD GENERAL AND MARINE HOSPITAL TRAINING SCHOOL FOR NURSES.

Officers for 1908-09: Hon. President, Miss Morton; President, Miss G. Morrison; First Vice-President, Miss P. J. Cottrill; Second Vice-President, Miss Ella Baker; Secretary, Miss J. E. Carr; Assistant-Secretary, Miss E. M. Dawson; Treasurer, Miss M. M. Redmond.

Sick Visiting Committee: Miss Moore, Miss Robinson, Miss G. Morton, Miss Klinck.

The meetings are held on the last Thursday of the month at 3 p.m. in the board room of the hospital.

ALUMNAE ASSOCIATION, TORONTO GENERAL HOSPITAL.

President—Mrs. Findlay.
First Vice-President—Miss Ellis.
Second Vice-President—Miss Tweedie.
Recording Secretary—Miss Neilson.
Corresponding Secretary—Mrs. Aubin.
Treasurer—Marion E. Hall, 18 Earl St.
Board of Directors—A. J. Scott, Grace Hospital; M. Tweedie, 53 Langley Ave.; Edith Hargraves, 146 Winchester St.
Conveners of Commitees:
Sick Visiting—Miss Kilgour.
Registration—M. E. Christie, 19 Classic Ave.
Programme—Mrs. Pellatt.
Social and Lookout—Miss Brereton.
Press and Publication—Mrs. Feeney.
Central Registry—Miss Kate Snodgrass, 644 Spadina Ave.; H. Fralick, 728 Spadina Ave.
Canadian Nurse Representative—Miss Lennox, 107 Bedford Road.

THE ALUMNAE ASSOCIATION OF THE HOSPITAL FOR SICK CHILDREN TRAINING SCHOOL FOR NURSES, TORONTO.

Hon. President—Miss Brent.
President—Miss M. L. Barnard, 608 Church St.
First Vice-President—Miss M. Ewing, 569 Bathurst St.
Second Vice-President—Miss A. Robertson, 182 Walmer Road.
Recording Secretary—Miss Monk, 668 Ontario St.
Corresponding Secretary—Miss B. Goodall, 660 Euclid Ave.
Treasurer—Miss M. Wilson, 47 Brunswick Ave.
Directors—Miss E. Jamieson, 107 Roxborough St. West; Miss M. Haley; Mrs. Thomas, 64 Binscarth Road.
Convener of General Business Committee—Miss J. Hamilton, 262 Jarvis Street.
Press Representative—Mrs. Clutterbuck, Grace St.
Canadian Nurse—Miss L. McCuaig, 605 Ontario St.
Invalid Cookery—Miss M. Gray, 505 Sherbourne St.

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Sick Visiting Committee—Miss J. Hamilton; Miss M. Ewing; Miss M. Isaac, 45 Alexander St. ,

Meetings are held in the Nurses' Residence on the second Thursday in each month, and will the nurses kindly remember that the little Invalid Cook Book might make an acceptable Christmas present for some of their friends?

HOSPITALS AND NURSES

A new hospital is to be built at Chiliwack, B.C.

Miss Des Brisay, M.G.H., of Montreal, is now residing in an apartment in the Brighton.

Miss May Brennan, H.C.H., has been appointed nurse in charge of the operating theatre, Hospital for Sick Children, Toronto.

"Clean Up" day has a good sound to us. Calgary's example in having a "Clean Up" day might be followed by all Canada with advantage.

Miss Shaw, Instructor of Nurses at the Montreal General Hospital, is at present in Montreal, having returned from the sanitarium at Saranac Lake much improved in health.

The Sisters of the Hotel Dieu in Montreal are considering the building of a new hospital under English-speaking management. It will cost about $100,000, and a site has already been offered to the Sisters.

Miss Mackenzie, Chief Superintendent of the Victorian Order of Nurses, gave an able and interesting lecture on Tuberculosis recently in the hall of the Y. W. C. A., Ottawa. Mr. John Manuel, President of the Anti-Tuberculosis Society, presided.

The first social evening held under the auspices of the Entertainment Committee of the Nova Scotia Graduate Nurses' Association took place at the Nurses' Home of the Victoria General Hospital, Halifax, on January 11th. It was largely attended and a most enjoyable evening was spent. The Conveners, Mrs. Forrest, Mrs. Doyle, and Mrs. Ross, were congratulated on the success of their undertaking; also Miss Deacon (V.O.N.), Miss Covey (V.G.H. staff), for the excellent musical programme provided. The regular meetings held at Restholm, the first Saturday of each month, continue to be well attended. Dr. Birt's addresses on "Modern Methods of Curing Cases of Pneumonia and Typhoid Fever" have been much appreciated. Six members have been elected to act for six months on the Sick Visiting Committee and to report at the monthly meetings. An Act to incorporate the association introduced before the Local Legislative Assembly has been approved by the Bills Committee and passed. The following members necessarily residents of Halifax were elected to act as incorporators: Mrs. W. D. Forrest, Mrs. James Ross, Miss V. Kirke, V. G. Hospital; Miss Deacon, V.O.N.; Miss K. Graham, private nurse; Miss M. Drayton, private visiting nurse; Miss Pemberton, Restholm.

Toronto Orthopaedic Hospital

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Hospital extension is being pushed forward all over Canada. Among those who are building or are about to build (usually a new wing) in Ontario, are the hospitals at Barrie, Stratford, Galt and Guelph, and the beautiful new hospitals at Calgary, Regina and Edmonton will make 1910 memorable in hospital circles.

On Saturday, March 26, the Nova Scotia Graduate Nurses' Association assembled by invitation at the Nova Scotia Hospital, Dartmouth. The members were received by Miss Sampson and her assistants and escorted through the wards, where the apparatus and methods in the nursing of patients suffering from mental disease were exhibited and explained. The visit concluded with a most interesting and instructive address from the Medical Superintendent, Dr. Hattie. The Nova Scotia Hospital was the second institution in Canada to establish a training school for nurses in connection with the care of the insane, and Dr. Hattie testified to the useful work accomplished by its graduates and the invaluable services of the Lady Superintendent, Miss Sampson, who is also a Provincial Vice-President of the Nova Scotia Association.

In Calgary the Board of Health at its last meeting decided that an isolation hospital is an absolute necessity, the present accommodation being far from adequate. It was suggested that the old "General," just vacated, might be made to do, and the Board passed the following resolution, which is to be placed before the City Council of Calgary at once: The Board of Health recommend that the City Council have an estimate made of the cost of putting the old General Hospital building in shape for use as an isolation hospital, should it be necessary later on to have this accommodation, the present isolation hospital building not being large enough to take care of the patients received except under very nominal conditions. Also that an estimate be prepared for a modern isolation hospital building to be located on the new General Hospital grounds. The Board also passed a motion endorsing the efforts of the citizens and civic officials in having a "Clean Up" day, as being beneficial to the general health of the city.

The graduating exercises of the Misericordia Hospital Training School for Nurses, Edmonton, Alta., took place at the hospital in September, 1909. The graduate, Miss Grace D. Mills, of Detroit, Mich., was accompanied to the reception room by Mrs. (Dr.) Gillespie. The room was decorated in gold and green, the class colors. The opening remarks by His Lordship Bishop Legal were very appropriate, congratulating the hospital authorities and the medical men who devoted so much time to the training school and interests of the hospital, on their splendid success. Dr. McGibbon addressed the graduate in a most eloquent and practical manner, congratulating her on having attained the standing of graduate nurse, and describing the means to obtain the object of her ambition, success in the noble profession she had chosen. The doctor concluded by saying: "And now, as you are to take leave of this hospital, your alma mater, it would be well to glance briefly on the splendid record of the institution which to-day sends you forth as its first graduate and representa-

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tive. It was on the 27th of May, 1900, that four Sisters and a trained nurse arrived from Montreal and located in a small house, where they received and treated obstetrical cases only. After five years of patient and honest effort the corner-stone of this building, which represents but a wing of the final edifice, that will one day grace this portion of the city, and take its place as one of the greatest institutions for the care of the sick in Western Canada, was laid in June, 1905, and completed in March, 1906. Since that date over 2,000 patients have been received and treated within its walls, thus offering the best advantages for both maternity and general nursing, and we are glad to say that these unrivaled opportunities have been fully taken advantage of by you and the brilliant course which you have taken will, we trust, be but the promise of a more brilliant future. The Premier, Hon. A. C. Rutherford, congratulated the training school staff of lecturers, the hospital authorities and the nurses, on their good work and on the success they had attained, etc. Senator Roy recalled the arrival of the Sisters in Edmonton nine years ago, the encouragement he gave them to build a well-equipped and up-to-date hospital, promising to patronize it by doing all in his power to help the Sisters in their good work. His Lordship Bishop Legal concluded by thanking the Premier for honoring them with his presence, by congratulating once more the graduate and staff of lecturers, and by a special word of praise and thanks to the ladies and gentlemen who contributed in making the musical programme such a success. Those present were the Training School staff of lecturers: Dr. Gillespie, Dr. McGibbon, Dr. McDonnell, Dr. Christian, Dr. Redmond, Dr. Wells, Dr. Macdonald, Dr. Revell, Provincial Bacteriologist; Dr. Whitelaw, Medical Health Officer; Dr. Barron, Provincial Inspector; Rev. Father Magnan, Provincial Superior, Winnipeg; Father Pathiers, Winnipeg; Father Bernard, Vegreville; Father Ethier, Morinville, and several others. A large number of friends of the institution were also present, and the different hospitals of the city were represented. The diploma was presented to Miss Mills by His Lordship the Bishop, and the hospital gold medal and the McGibbon gold medal were presented by the Premier.

Our readers will read with interest the letter from Mrs. Reynolds in regard to her work as Welfare Nurse in the factory of the McClary Manufacturing Co. of London, which has branch houses in St. John, Montreal, Toronto, Hamilton, Winnipeg, Calgary and Vancouver. This is good work, and the Welfare Nurse can do great things for the progress of the community, to save life and health.

The following are the officers of the St. Elizabeth Visiting Nurses' Association: Patron, the Most Rev. F. P. McEvay, Archbishop of Toronto; Hon. President, Lady Falconbridge, 80 Isabella Street; President, Mrs. J. McLean French, 137 Bond Street; 1st Vice-President, Mrs. William MacKenzie, Avenue Road Hill; 2nd Vice-President, Mrs. H. T. Kelly, 33 Maple Avenue; Treasurer, Mrs. James Dwyer, 132 Carlton Street; Cor. Secretary, Mrs. D. A. O'Sullivan, 1155 King West; Rec. Secretary, Miss L. Hynes, 375 Berkeley Street; Nurses, Miss Annie B. Long, Miss Mary E. Kelly, 507 Sherbourne Street; telephone N. 889.

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